

Why I choose Denmark.

Choosing Denmark was an easy choice. My friend is doing her PhD in a hospital in Denmark. Therefore, I knew some things about their system, work ethic and had a previous insight into a Danish hospital. I organized the flight and housing by myself and was lucky enough to have a Danish buddy organized by the school.

On Sunday I arrived in where Melanie (a Danish nursing student and my buddy) was kind enough to pick me up at the train station in Vejle. She showed me the hospital and campus which was very helpful.

SKYLINE OF VEJLE



University

We had a chill and relaxed start at the UCL school at 9:15. This was very unusual as a swiss student. First, we got introduced to the professional association of the nurses who even provided us a typical Danish bread for the road. I got to meet the other students from the Netherlands and France. We shortly introduced ourselves and got a tour of the university. Everything is modern and new. What surprised me was that they have much more practical training than we have. Furthermore, they have access to the skills rooms 24/7 and are allowed to train whenever they want to. After our lunch break, we got introduced to the Danish health care system and talked about ours. At 14:00 we were



TRAINING ROOMS AT THE UNIVERSITY

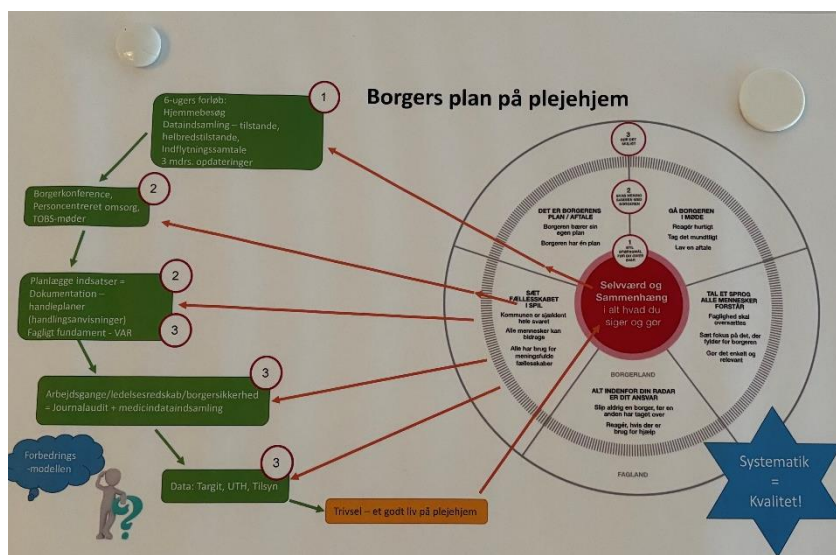
already off and had time to work on our presentation. The other students and I also took some time to explore Vejle before having dinner. Things here are more relaxed and people seem to be less stressed.

Nursing Home in Kolding

I got to have an insight at a nursing home at the commune of Kolding. To start the day nurse Mette showed me around the nursing home and I got the clothes they were wearing. The nursing home is separated into three floors. Each floor has their own nurse and four nursing assistants. The nurses' job is mostly to coordinate all the needs of the residents and the answer questions regarding their medication. Each resident has a separate room which is personalized with their own belongings and memories. I was amazed that they do not mobilize the residents' but are using a lift which even could carry them into the bathroom. At 10:30am we had Lunch all together and at 11:30 all the nurses met to discuss the day and the week ahead. Two things that surprised me were that the nurses put on music that the resident loved while taking care of them and that they had special sheets which would make moving the resident in the bed easier.

The second day I could join nurse Helene. She is the nurse who is responsible for the 3rd floor. We took care of all the wounds and asked around if anyone needed some extra help. After the lunchbreak I was able to see the kitchen. It was quite impressive because each resident had their own diet. They could choose what they would like to have for breakfast, lunch, dinner and they even provided them a snack platter for the night. They could write down ideas of food that reminded them of past times. After this introduction I was able to take part in a conversation that the nurses, the doctor and

the daughter in law had of a resident. Even though I was not able to understand anything I was impressed by their closeness. They seemed to talk at eye level and resident centered. In general, their care is way more resident/



MODELL FOR PATIENT CENTERED CARE

patient centered, and they are laughing more and bring a lots of humor into their daily lives.



LEARNING MATERIAL FOR STUDENTS

Self-Study Day

On Friday we had a self-study day where we had time to prepare our presentation about the health care system from the country we were coming from. It is quite common for students to have time for their studies.

Orthopedic Ward at the hospital in Vejle

Today I got to see the surgical ward. I was able to go into a surgery and see a rotator cuff getting fixed. I was surprised on how involved the nurses were. There was one nurse assisting the surgeon during the operation which I found quite impressive. After the operation the nurses took care of everything. I was impressed on how closely they were working together and on how thought through the whole process was. What surprised me even more was that they try everything before they perform surgery. The nurses know how to do acupuncture to release pain or to reduce a patients' stress before surgery. They offer counseling to patients who are overweight and therefore putting their joints at risk. The surgeon explained me every step and I felt very welcome and seen at eye level during the shoulder surgery. A very different experience from what I have experienced with surgeons in Switzerland. They had a medication plan for the patient where everything was written down. The booklet was a helpful tool for both the nurse and patient. What surprised me was that they would give him morphine after being discharged from the hospital as we stopped doing that in Switzerland as a take home medicine. As it even showed him each appointment he had planned. He will get notified via text message if there will be any updates regarding his plan. That is how the Danish system works, very digital and though trough. On the second day I got see how the doctors examined patients who need

surgery. The planning of the operation and instruction was done by the nurse. That was quite surprising. In the afternoon I got to see the ambulatory which was closely working together with the ER. Patients came in with wounds and casts. They told me that the nurses are the experts in taking care of wounds and that doctors only know



OR IN VEDLE

little on taking care of them. Once more I was quite surprised on how independent the nurses are in their tasks and on how they were treated so well by the doctors. I could not feel any sort of hierarchy and really saw them working together as a team.

The last day we got to see the bed ward of the orthopedic department. It was a slow day, and I was able to get an insight on what nurses do at this ward. It was not all too different from a bed ward in Switzerland, except the working hours and the nurse-to-patient ratio.

Bullet points that stuck with me:

- 1) Nurses have more competences than nurses in Switzerland do.
- 2) They take time on educating the patients and making sure that they understood everything.
- 3) They have a centralized System where each record gets stored, which makes it super handy to get access to all the medical data.
- 4) Nurses and doctors work as a team and doctors do not see themselves as something better.
- 5) They are way more at ease, shorter working hours, and less patients/ nurse.
- 6) They name their patients by their first name which makes the nurses more approachable and breaks the hierarchy.